

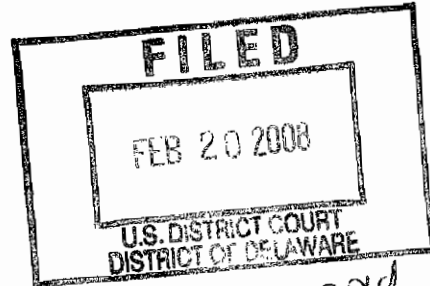
To: The Honorable Gregory M. Sleet
United States District Court
United States District Courthouse
Lockbox 18,844 North King Street
Wilmington, Delaware 19801

From: James Arthur Biggins #319264

Delaware Correctional Center
1181 Paddock Road, P.O. Box 500
Smyma, Delaware 19977

Date: February 15, 2008

Re: Biggins v. Minner, et al., C.A. No. 08-04-GMS



RD scanned

Your Honor,

As you are aware, I've been trying to get medical care for myself for quite sometime now. Despite having submitted multiple sick call. All that has happen this week when an officer were able see medical personnel or the doctor, and tell them my request for medical treatment was to "put in a sick call. It has been especially difficult for now, because notwithstanding no medications. My back has been seriously bothering.

I honestly appreciate any assistance that you may be able to give to me. Please note as well. I receive a sick call request copy back on 2/9/08, although it stipulate that all meds had been reordered. Morning nurse (Ray) informed me this morning at 3:45 am, that she checked the prescription orders after have showed her this same sick call on Monday (2/11/08) and could not find any orders for meds in my name.

Sincerely,
James Arthur Biggins

1/24/08

Emergency

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER
 This request is for (circle one) MEDICAL DENTAL MENTAL HEALTH

JAMES Arthur Biggins
 Name (Print)

5/11/69
 Date of Birth

#319264
 SBI Number

Bldg #22 / A-U-4
 Housing Location
1/29/08
 Date Submitted

Complaint (What type of problem are you having)?

Third request to see doctor, CHRONIC CARE PATIENT! All meds have
EXPIRED AND MY BACK HURTS bad ONE of my MANY MEDICAL CONDITIONS. HAVE NOT
HAD PAIN MEDICATION SINCE last Thursday (1/24/08).

James Arthur Biggins
 Inmate Signature

January 29, 2008
 Date

The below area is for medical use only. Please do not write any further.

S: Pain med reordered. - Jm/RW 1-24-08

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

2/10/08 approx 4:35 pm - RN Dummie still waiting on pain medication
to come in. No answer to whether or not I'll get the E/M's for my rimexon
A: that was only given to me for 4 days 2/11/08 approx 5:25 am RN Veria came
giving morning meds, ask her had my pain meds come in and E/M's. She told me,
they should already have. But want know for sure until they see what the med-
P: tech puts out. She has been on vacation the last few weeks. 2/14/08 approx:
3:45 am RN Kaye accompanied by Sgt. Gibbs advised me that she had checked the med orders
after I had showed her the copy of my sick call Monday morning for roundball meds.
Told me that there isn't any new orders in for me.

E: nursing please check into this +
take care of problem. 2/4/08 JWB

Provider Signature & Title

Date & Time

3/1/99 DE01

FORM#:

MED

Received 1-30-08, 0900 J. McKenzie RW
 Returned 2/9/08

* URGENT

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER
This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

JAMES ARTHUR BIGGINS Bldg: 22 (A-11-4)
Name (Print) Housing Location
MAY 11, 1964 #319264 FEBRUARY 5, 2008
Date of Birth SBI Number Date Submitted

Complaint (What type of problem are you having)?

Need to a doctor (A.S.A.P) for RENEWAL of Chronic Care Medications
My back is severely restricting my MOVES, HAVING ALREADY BEEN WITHOUT PAIN MEDS
ETC., FOR WEEKS AS WELL AS OTHER MEDICATIONS!

James Arthur Biggins February 5, 2008
Inmate Signature Date

The below area is for medical use only. Please do not write any further.

S: Already scheduled to see MD, - 8m/RW 2-13-08

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A: _____

P: _____

E: _____

3/1/99 DE01 FORM#: _____
Provider Signature & Title Date & Time
Received 2-7-08; 0815 J. Wickenjier
(COP... to 8m)

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER
This request is for (circle one) MEDICAL DENTAL MENTAL HEALTH

James Arthur Biggins Bld #22 KA-U-4
Name (Print) Housing Location
May 11, 1964 #319264 2/2/08
Date of Birth SBI Number Date Submitted

Complaint (What type of problem are you having)?

This is my 5th sick-call, need to see the doctor. HAVE NO MEDS AND my
back is causing SEVERE pain, AND having headaches.

James Arthur Biggins February 2, 2008
Inmate Signature Date

The below area is for medical use only. Please do not write any further.

S: Already scheduled to see MD, -gm/rn 2-13-08

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

3/1/99 DE01

FORM#:

MED

Received 2-11-08; 0930 J. McKenjin

I/M James Arthur Higgins
SBI# 319114 UNIT #19/A-11-4
DE WARE CORRECTIONAL CENTER
1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977

X-RAY
S.W.S.C.



To the Clerk of the Court
United States District Court House
Lockbox 18,844 North King Street
Wilmington, Delaware
19801

1990181230 0007

